

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000024781

FILED
Jan 30, 2009
Secretary of State

Entity Name: LAWNS UNLIMITED OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2907 DUSA DR
SUITE J
MELBOURNE, FL 32934

New Principal Place of Business:

2743 AURORA RD
MELBOURNE, FL 32935

Current Mailing Address:

2907 DUSA DR
SUITE J
MELBOURNE, FL 32934

New Mailing Address:

PO BOX 120907
WEST MELBOURNE, FL 32912

FEI Number: 57-1157251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVES, ANNE E
2907 DUSA DR
SUITE J
MELBOURNE, FL 32934 US

Name and Address of New Registered Agent:

REEVES, ANNE E
2743 AURORA RD
WEST MELBOURNE, FL 32912 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANNIE REEVES

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REEVES, ANNE E
Address: 3625 HIELD ROAD
City-St-Zip: MELBOURNE, FL 32904

Title: VICE () Delete
Name: FRYE, JAMES
Address: 3625 HIELD ROAD
City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: REEVES, ANNE E
Address: 2743 AURORA RD
City-St-Zip: MELBOURNE, FL 32935

Title: VICE (X) Change () Addition
Name: FRYE, JAMES
Address: 2743 AURORA RD
City-St-Zip: MELBOURNE, FL 32935

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNIE REEVES

PRES

01/30/2009

Electronic Signature of Signing Officer or Director

Date